

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

ADDRESS (number and street)

ONE MASSACHUSETTS AVE NW SUITE 800

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00172833

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

09

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael R. McLeod

Signature of Treasurer

Electronically Filed by Michael R. McLeod

Date

10

15

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 26

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		48824.32
(b) Cash on Hand at Beginning of Reporting Period	77069.62	
(c) Total Receipts (from Line 19)	28647.00	112992.30
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	105716.62	161816.62
7. Total Disbursements (from Line 31)	23147.62	79247.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82569.00	82569.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

3 / 26

Write or Type Committee Name

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	16005.00	64995.00
(ii) Unitemized	12585.00	47870.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28590.00	112865.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	28590.00	112865.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	57.00	127.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28647.00	112992.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28647.00	112992.30

DETAILED SUMMARY PAGE

of Disbursements

4 / 26

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	79000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	147.62	247.62	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23147.62	79247.62	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23147.62	79247.62	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 26

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28590.00	112865.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28590.00	112865.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Mark W. Anderson

Mailing Address PO Box 49

City

Burns

State

WY

Zip Code

82053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burns Insurance Agency

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6202

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jack Becker

Mailing Address Box 274

City

Dutton

State

MT

Zip Code

59433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Becker Ins Agency

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6181

Amount of Each Receipt this Period

245.00

C.

Full Name (Last, First, Middle Initial)

Harry C. Daisey

Mailing Address 6291 Baker Road

City

Seaford

State

DE

Zip Code

19973

FEC ID number of contributing
federal political committee.

C

Name of Employer
Daisey Insurance Inc.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6247

Amount of Each Receipt this Period

495.00

SUBTOTAL of Receipts This Page (optional)

990.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Dwight Deboer

Mailing Address PO Box 306

City

Lafayette

State

MN

Zip Code

56054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Insurance Agency

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.6254

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Lori Denney

Mailing Address 1360 Richland Road

City

Yuba City

State

CA

Zip Code

95993

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6229

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Hank Dicke

Mailing Address 1227 Pamala

City

Holdrege

State

NE

Zip Code

68949

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agro National

Occupation
Marketing Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6198

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

995.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Robert Eynon

Mailing Address PO Box 2421

City

Williston

State

ND

Zip Code

58802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Robert J. Eynon Agency

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6235

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robert Fleece

Mailing Address 4775 N 625 W

City

North Salem

State

IN

Zip Code

46165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fleece Insurance, Inc.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6262

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Micky D. Freeman

Mailing Address PO Box 336

City

Edneyville

State

NC

Zip Code

28727

FEC ID number of contributing
federal political committee.

C

Name of Employer
ArmTech

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6227

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Bryan Fullingim

Mailing Address Box 273

City

Petersburg

State

TX

Zip Code

79250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fullingim Agency, Inc.

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.6187

Amount of Each Receipt this Period

245.00

B.

Full Name (Last, First, Middle Initial)

Dan Gasser

Mailing Address 1025 N E Moss Point Road

City

Lees Summit

State

MO

Zip Code

64064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hudson Crop Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6258

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Gaylan Gors

Mailing Address 46648 300th Street

City

Beresford

State

SD

Zip Code

57004

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Ins Svcs

Occupation
Adjuster

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6178

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

965.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Leroy Adam Hamann

Mailing Address 3435 Borderline Dr

City

Belleville

State

IL

Zip Code

62221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation

Insurance broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6237

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jeff Hastings

Mailing Address 2727 W 2nd Suite 106

City

Hastings

State

NE

Zip Code

68901

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Insurance

Occupation

Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6268

Amount of Each Receipt this Period

245.00

C.

Full Name (Last, First, Middle Initial)

Ronald Heal

Mailing Address 25456 Esmond Road

City

Malta

State

IL

Zip Code

60150

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6241

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

745.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Tom Healy

Mailing Address PO Box 2150

City

Havre

State

MT

Zip Code

59501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Koefod Insurance Agency

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6239

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

David A. Heatherly

Mailing Address 9444 Boyne City Road

City

Charlevoix

State

MI

Zip Code

49720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glencoe U.S. Holdings

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6267

Amount of Each Receipt this Period

995.00

C.

Full Name (Last, First, Middle Initial)

Connie S. Hoff

Mailing Address 313 6th Street, NW

City

Adams

State

MN

Zip Code

55909

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers State Agency of
Adams

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6232

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Renee Huber

Mailing Address 202 Out Street

City

Wimbledon

State

ND

Zip Code

58492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tri-County Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6221

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Phil Ivans

Mailing Address 910 W Encore Dr

City

Hanford

State

CA

Zip Code

93230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ivans Insurance Agency

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6209

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Debra I. Janson

Mailing Address 4202 Summer Field Road

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6207

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Dean Jessee

Mailing Address 3220 Monroe

City

Galena

State

KS

Zip Code

66739

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6206

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ralph C. Johnsen

Mailing Address 219 E 15th Avenue

City

Redfield

State

SD

Zip Code

57469

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6204

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Jon King

Mailing Address 1907 Cypress St

City

Higginsville

State

MO

Zip Code

64037

FEC ID number of contributing
federal political committee.

C

Name of Employer
CGB Diversified Services
Inc

Occupation
Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6191

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

745.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

De Lee Boyd Knudson

Mailing Address 621 Broadway

City

Centerville

State

SD

Zip Code

57014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Knudson & Preheim, Inc.

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6231

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Merlyn Kuhl

Mailing Address PO Box 483

City

Osmond

State

NE

Zip Code

68765

FEC ID number of contributing
federal political committee.

C

Name of Employer
New Frontier Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.6266

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Dusty Lynch

Mailing Address 5010 S. Loop 340

City

Waco

State

TX

Zip Code

76706

FEC ID number of contributing
federal political committee.

C

Name of Employer
ArmTech

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.6248

Amount of Each Receipt this Period

495.00

SUBTOTAL of Receipts This Page (optional)

1745.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

James W. Nielsen

Mailing Address 404 Linden Drive

City

Madison

State

SD

Zip Code

57042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nielsen Crop InsuranceOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6225

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Diane Norton

Mailing Address 5865 Victoria Way

City

Atwater

State

CA

Zip Code

95301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employedOccupation
Insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6260

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Scott Oliva

Mailing Address PO Box 218

City

Milligan

State

NE

Zip Code

68406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oliva Insurance AgencyOccupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.6189

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

995.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Lyle Opland

Mailing Address 3215 4th St SW #12

City

Minot

State

ND

Zip Code

58701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 07 / 2009

Transaction ID: SA11AI.6193

Amount of Each Receipt this Period

245.00

B.

Full Name (Last, First, Middle Initial)

Bert D Owens

Mailing Address PO Box 728

City

Red Bluff

State

CA

Zip Code

96080

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2009

Transaction ID: SA11AI.6226

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Dale Perry

Mailing Address 10596 - 24th Ave.

City

Eau Claire

State

WI

Zip Code

54703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Great American Ins. Co

Occupation
Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 21 / 2009

Transaction ID: SA11AI.6245

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Doug Petersen

Mailing Address Hwy 200, Box 256

City

Finley

State

ND

Zip Code

58230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Citizens Insurance Agency

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6264

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Michael Podolak

Mailing Address 843 Riverbend Rd

City

Oxbow

State

ND

Zip Code

58047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Podolak & Associates

Occupation
Owner/Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6215

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Dennis Reynolds

Mailing Address 1638 E Houston

City

Fresno

State

CA

Zip Code

93720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6250

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Dennis K. Samuelson

Mailing Address 600 Johnson

City

Jewell

State

IA

Zip Code

50130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Drake Ins & Financial Svcs

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6213

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Brian Shouse

Mailing Address 1025 State Route 2091

City

Morganfield

State

KY

Zip Code

42437

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Farmer agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.6252

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Russel Slade

Mailing Address 1091 N. Dockweiler Rd

City

Cordele

State

GA

Zip Code

31015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Diversified Insurance Svcs

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6200

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

995.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Dennis R. Stang

Mailing Address PO Box J

City

New England

State

ND

Zip Code

58647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Centennial Ins Agency Inc

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6211

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Carl A. Stillwell

Mailing Address 1450 Whyler Rd

City

Yuba City

State

CA

Zip Code

95993

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sierra Valley Ins Svcs Inc

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6219

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

G.C. Tatum, III

Mailing Address PO Box 258

City

Mer Route

State

LA

Zip Code

71261

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tatum's Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6223

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Monty VanderBeek

Mailing Address 18412 East Louise Ave

City

Escalon

State

CA

Zip Code

95320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western States Crop Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6256

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Randy Walker

Mailing Address 1533 Hwy 178

City

Potts Camp

State

MS

Zip Code

38659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agland Insurance Svcs

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.6217

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Dale Ward

Mailing Address 133 Glen Oaks Dr

City

Council Bluffs

State

IA

Zip Code

51503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agro National

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6195

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

995.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

Thomas Watson

Mailing Address 129 Longwood Dr

City

State

Zip Code

Papillion

NE

68133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agro National

Occupation
VP-CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6185

Amount of Each Receipt this Period

245.00

B.

Full Name (Last, First, Middle Initial)

Brian D. Wolff

Mailing Address 65810 145th Street

City

State

Zip Code

Adams

MN

55909

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAU Country Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6269

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Tina Wood

Mailing Address 403 2nd SE

City

State

Zip Code

Joplin

MT

59531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wood Enterprises, Inc.

Occupation
Insurance agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6243

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

745.00

TOTAL This Period (last page this line number only)

16005.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial) BOB ETHERIDGE FOR CONGRESS COMMITTEE	Transaction ID: SB23.6164
Mailing Address POST OFFICE BOX 28001 PO BOX 28001	Date of Disbursement <div> <div>09</div> <div>16</div> <div>2009</div> </div>
City RALEIGH State NC Zip Code 27611	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name BOB ETHERIDGE	<div>Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) BOSWELL FOR CONGRESS	Transaction ID: SB23.6167
Mailing Address PO Box 6220	Date of Disbursement <div> <div>09</div> <div>23</div> <div>2009</div> </div>
City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>5000.00</div>
Candidate Name LEONARD L. BOSWELL	<div>Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS	Transaction ID: SB23.6166
Mailing Address P.O. Box 15703 P.O. Box 15703	Date of Disbursement <div> <div>09</div> <div>30</div> <div>2009</div> </div>
City Tallahassee State FL Zip Code 32317	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name F ALLEN JR BOYD	<div>Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial) CONAWAY FOR CONGRESS	Transaction ID: SB23.6162 Date of Disbursement
Mailing Address PO Box 51272	<div> <div>07</div> <div>31</div> <div>2009</div> </div>
City Midland State TX Zip Code 79710	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name K MICHAEL CONAWAY	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CONAWAY FOR CONGRESS	Transaction ID: SB23.6169 Date of Disbursement
Mailing Address PO Box 51272	<div> <div>09</div> <div>30</div> <div>2009</div> </div>
City Midland State TX Zip Code 79710	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name K MICHAEL CONAWAY	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON	Transaction ID: SB23.6171 Date of Disbursement
Mailing Address P.O. Box 100 P.O. Box 100	<div> <div>07</div> <div>30</div> <div>2009</div> </div>
City Bolton State MS Zip Code 39041	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1500.00</div>
Candidate Name BENNIE G THOMPSON	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197

City
LITTLE ROCK

State
AR

Zip Code
72203

Purpose of Disbursement

Candidate Name
BLANCHE LAMBERT LINCOLN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.6165

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN THUNE

Mailing Address 224 NORTH PHILLIPS AVENUE STE 210

City
SIOUX FALLS

State
SD

Zip Code
57104

Purpose of Disbursement

Candidate Name
JOHN THUNE

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District: 00

Transaction ID: SB23.6155

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
KING FOR CONGRESS

Mailing Address 126 Des Moines Street
P.O. Box 576

City
Odebolt

State
IA

Zip Code
51458

Purpose of Disbursement

Candidate Name
STEVE MR. KING

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 05

Transaction ID: SB23.6156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

LATHAM FOR CONGRESS

Mailing Address P.O. Box 71
PO BOX 71

City State Zip Code
Clarion IA 50525

Purpose of Disbursement

Candidate Name
THOMAS P. LATHAM

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.6161

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

MARION BERRY FOR CONGRESS

Mailing Address P.O. BOX 8084
P.O. BOX 8084

City State Zip Code
JONESBORO AR 72403

Purpose of Disbursement

Candidate Name
MARION BERRY

Office Sought: ☒ House
☐ Senate
☐ President

State: AR District: 01

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.6157

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

NEUGEBAUER CONGRESSIONAL COMMITTEE

Mailing Address 3305 66th Street Suite # 1

City State Zip Code
Lubbock TX 79413

Purpose of Disbursement

Candidate Name
RANDY NEUGEBAUER

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 19

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.6160

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CROP INSURERS POLITICAL ACTION COMMITTEE (AACI PAC)

A.

Full Name (Last, First, Middle Initial)

PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City
GREAT BEND

State
KS

Zip Code
67530

Purpose of Disbursement

Candidate Name
PAT ROBERTS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.6163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City
GREAT BEND

State
KS

Zip Code
67530

Purpose of Disbursement

Candidate Name
PAT ROBERTS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.6168

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

SENATE VICTORY FUND PAC, THE

Mailing Address PO BOX 7274

City
TUPELO

State
MS

Zip Code
38802

Purpose of Disbursement

Candidate Name
SENATE VICTORY FUND PAC, THE

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.6170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)